

Intended DBE Participation Summary Sheet

Contract #, and Name _____

DBE Goal _____

Total Bid/Proposal Amount _____

Name and Address of DBE Participants	Name of Contact Person	Is Subcontractor a Certified DBE? Certifying Agency?	Scope of Work to be performed	DBE dollar Amount	Percentage of Dollar Amount of Total Bid/Proposal

Submitted by: _____
(Print Name)

Submitted by: _____
(Signature)

By signature, respondent is agreeing to commit to using Best Effort to meet contract goal for DBE participation

Company's Name: _____

Date: _____

On business stationary (of the DBE Applicant), please attach verification of agreement to stated terms.